

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SO	71058	4-20-99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71090	5-10-99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
1	12/9/98
2	14/10/98
3	1/11/98
4	8/11/98
5	12/12/98
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9	14/1/99
10	15/1/99
11	16/1/99
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 editions, staple additional sheet here. **Best Available Copy**